

ALMA SUMMARY REPORT QUARTER ONE 2024

INTRODUCTION

Towards the end of the first quarter of this year, Ministers of Health from Africa’s high burden high impact (HBHI) countries met in Yaoundé and issued with the utmost urgency a commitment to concerted action to end malaria deaths by reinforcing the “High Burden High Impact” (HBHI) approach. This commitment is captured in the Yaoundé Declaration.

THE FOUR PILLARS

The Ministers appreciated that the following four High Burden High Impact pillars were critical to sustainably and equitably addressing malaria to attain effective control and elimination.

1. Political will (at all levels)
2. Strategic use of information for action
3. Better technical guidance
4. Effective coordination

The Ministers also appreciated that these pillars cannot work in a vacuum but require functional national health systems and the adoption of a multi sectoral approach across government and between public and private sectors.

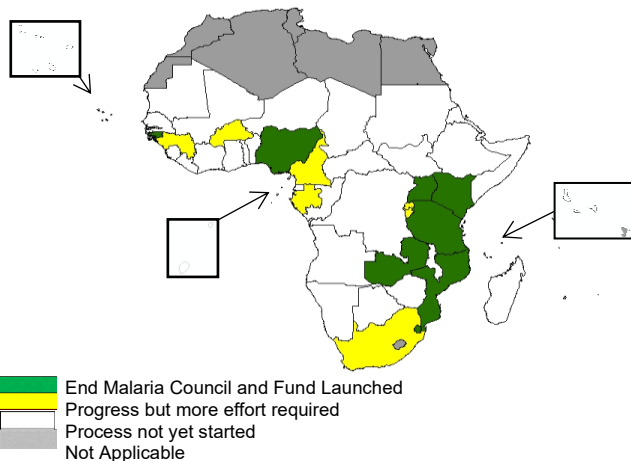
The ALMA secretariat is pleased to commit to supporting countries and partners in operationalizing this Ministerial mission.

Strengthening political will

In supporting the ministers’ commitment to mobilize leadership across sectors, ALMA commits to supporting each country in the establishment of national End Malaria Councils which include leadership from different government sectors, traditional leaders, religious leaders, private sector leaders, civil society leaders and youth leaders.

- MEMBERS
- Algeria
 - Angola
 - Benin
 - Botswana
 - Burkina Faso
 - Burundi
 - Cameroon
 - Central African Republic
 - Cabo Verde
 - Chad
 - Comoros
 - Republic of Congo
 - Côte d'Ivoire
 - Democratic Republic of Congo
 - Djibouti
 - Egypt
 - Equatorial Guinea
 - Eritrea
 - Eswatini
 - Ethiopia
 - Gabon
 - Ghana
 - Guinea
 - Guinea Bissau
 - Kenya
 - Lesotho
 - Liberia
 - Libya
 - Madagascar
 - Malawi
 - Mali
 - Mauritania
 - Mauritius
 - Mozambique
 - Morocco
 - Namibia
 - Niger
 - Nigeria
 - Rwanda
 - Sahrawi Arab Democratic Republic
 - São Tomé and Príncipe
 - Senegal
 - Seychelles
 - Sierra Leone
 - Somalia
 - South Africa
 - South Sudan
 - Sudan
 - The Gambia
 - Togo
 - Tunisia
 - Uganda
 - United Republic of Tanzania
 - Zambia
 - Zimbabwe

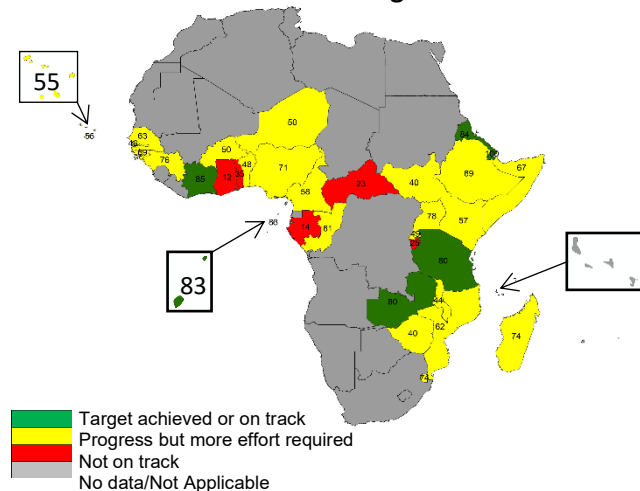
End Malaria Council and Malaria and



Source: Quarter 1 2024 ALMA Scorecard

The designation employed and the presentation of material in these maps does not imply the expression of any opinion whatsoever on the part of ALMA concerning the legal status of any country, territory or area of its authorities or concerning the delimitation of its frontiers or boundaries.

% of National Malaria Strategic Plan Financed



Source: Quarter 1 2024 ALMA Scorecard

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Currently only four of the high burden countries, Mozambique, Tanzania, Uganda and Nigeria have established councils, with potential for engaging more leaders and mobilizing considerable resources for the national malaria programme. Two high burden countries, Cameroon and Burkina Faso are in the process of initiating their councils, whilst 5 countries; the Democratic Republic of Congo, Ghana, Mali, Niger, and Sudan still have to set up their high level body responsible for malaria elimination.

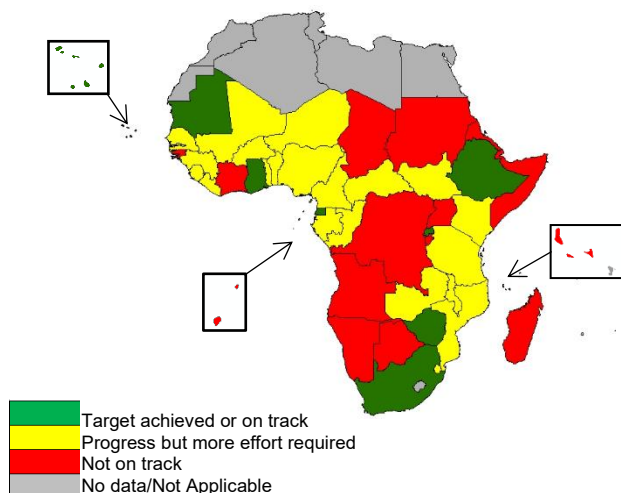
All Ministers are urged to seek an endorsement of the Yaoundé Declaration by Africa’s Heads of State and Government, in order to ensure national visions, development plans and budget allocations to prioritize malaria elimination. Currently only one of the high burden high impact countries has 80% of its malaria program financed.

Leadership in support of national malaria & other health programme systems

The robustness and resilience of health systems will determine to a large extent, the success of any malaria control and elimination program. This includes integration between health programs, as well as between related government sectors, and with the private health sector.

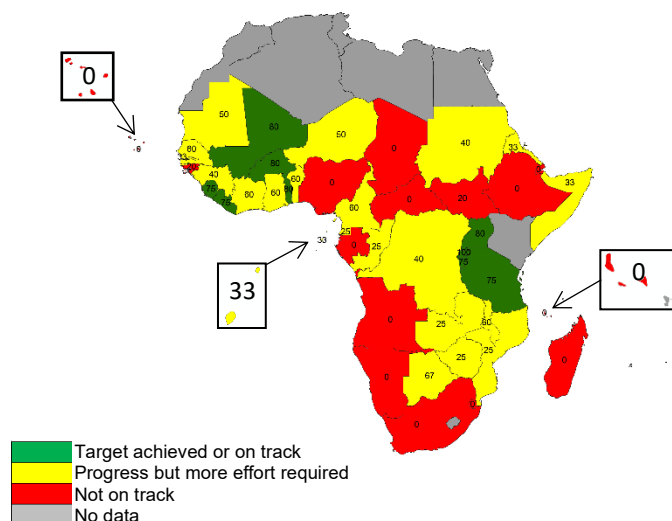
Countries and partners have agreed to adopt comprehensive structured subnational tailoring to efficiently and effectively deploy resources to maximize impact.

On track to reduce malaria incidence by at least 75% by 2025 (vs 2015)



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% of MDAs Achieving WHO Targets



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Currently, Ghana is the only high burden high impact country on track to reduce case incidence. The situation is not much better for neglected tropical diseases mass drug administration, which could be integrated with malaria programs, since both programs and commodities have to be delivered by community health workers at household level. With NTDs mass drug administration, Tanzania, Uganda and Mali are the only high burden countries meeting the WHO target.

Strengthening advocacy at all levels to leverage leadership and resources

There is an opportunity for all sectors to define their role in the fight against malaria and contribute to strengthening systems, vector control and prevention by integrating malaria into their policies, programmes, and budgets.

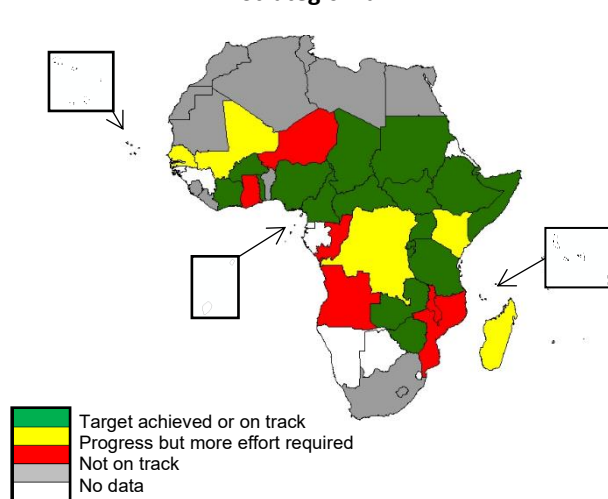
Signed, ratified and deposited the AMA instrument at the AUC



Source: Quarter 1 2024 ALMA Scorecard

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Malaria activities targeting refugees in Malaria Strategic Plan



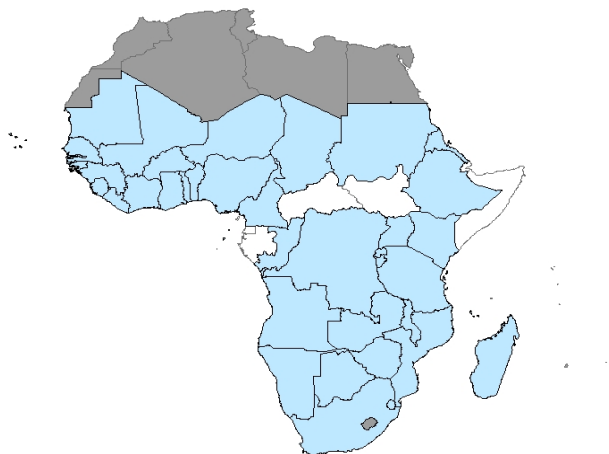
Source: Quarter 1 2024 ALMA Scorecard

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Independent national regulatory agencies and ministries of foreign affairs should support the ratification of the AMA statutes in order to ensure that countries benefit from improved access to medicines, and that there is collective coordinated effort towards harmonized local manufacturing of medical commodities. Ministries of home Affairs and foreign affairs could share the burden of providing services to refugees with the Ministry of Health.

The national end malaria and NTD councils should establish funds to tap private sector resources and working with the national malaria programs; use national and subnational malaria scorecards to track progress and identify bottlenecks and challenges that need to be addressed.

Countries with Malaria Control/Elimination Scorecard



Source: Quarter 1 2024 ALMA Scorecard

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The Ministers recognized that the notable funding shortfalls that have hindered efforts to combat malaria effectively, and that bolstering domestic resources from both the public and private sectors is critical.

ALMA will work with governments to ensure that the national scorecards focus on the critical indicators necessary for the attainment of the pledges in the Yaoundé Declaration.

Ensuring strategic use of information for action

The ministers pledged to invest in the deployment of efficient and reliable health information systems, including analytics and Geographic Information System technologies. Pledging to leverage these systems to support subnational stratification of malaria and relevant determinants of health, as well as the tailoring and targeting of interventions for enhanced impact. ALMA commits to support countries in designing appropriate tracking and reporting data driven tools to track and monitor the impact of subnational tailoring in countries. This will facilitate modification of structured investments for the most contextually appropriate mix of interventions and strategies at an impactful scale for malaria

To enhance the promotion of e-learning and support Ministers' commitment to leverage appropriate technologies to ensure cost-effective training; ALMA commits to introducing the agreed training modules on the Scorecard Learning platform.

The modification of the scorecard tools and aligning with the subnational tailoring will provide for country, district and community monitoring; as well as an accountability tool for supervision and monitoring of health programs and workers to improve quality of care at all levels, including service delivery for the prevention, diagnosis and treatment of malaria.

African Union and Regional Economic Committees,

ALMA has MOUs with the AUC; the RBM partnership to End Malaria; and each of the regional economic blocks. The Yaoundé Declaration will be worked into the joint regional engagement to ensure support for the enhanced monitoring and accountability based on subnational tailoring, as well as robust cross border collaboration and effective regional political oversight.

CONCLUSION

The fight against malaria on the African continent is a multi sectoral and multi stakeholder imperative; essential for the overall growth and development of the continent. For the HBHI countries, it is holding back cognitive development, learning, poverty reduction, productivity, growth and employment, of a sizable portion of the population.

The Yaoundé Declaration is an opportunity for all stakeholders in countries and partners to come together; marshaling collective expertise and capacities to end malaria deaths.

Zero malaria starts with me; it starts with all of us.